GENERAL INFORMATION

Businesses with an average monthly liability exceeding \$20,000 are required by law to pay their taxes by Electronic Funds Transfer (EFT). Corporation taxes are included in this category. Taxpayers who are identified as mandatory EFT filers will be notified by first class mail to begin making payments by EFT. Taxpayers who do not have an average monthly liability of \$20,000 may voluntarily choose to pay their corporation tax payments by EFT. Payments are made directly to the Tax Department's bank from your business bank account. EFT not only saves you the cost and inconvenience of writing checks, but also, ensures that your return payment will be made on time without the worry of a check being lost in the mail. For more information, call the Office of Customer Services at (804) 367-8037.

The enclosed vouchers are to be used for:

- (a) application for extension and payment of tentative tax due;
- (b) paying any tax due when filing your income tax return; and
- (c) filing your estimated tax declarations.

FORM 500V: When submitting payment with Form 500, Virginia Corporation Income Tax Return, complete and mail Form 500V, Virginia Corporation Income Tax Payment Voucher with your return.

FORM 500E: When requesting an extension of time to file and submitting payment of tentative tax due, complete and mail Form 500E Virginia

Corporation Extension Payment Voucher and Tentative Tax Return. Pass-through entities must file Form 502E to request an extension for filing Form 502, Virgina pass-through entity return. An extension of six months (the maximum extension of time allowable) will be granted provided **that Form 500E AND payment of tax due** are received by the due date of the corporate income tax return. Note: Effective January 1, 2003, the due date for a nonprofit corporation with unrelated business income is the 15th day of the <u>sixth</u> month following the close of the taxable year. The form must be filed to receive an extension even when no payment is due. Do not file an extension unless you are liable for a corporation return.

WHERE TO GET HELP: If you are unable to prepare your own return or need assistance, call or visit the Commissioner of the Revenue, Director of Finance, or Director of Tax Administration for your city or county, or the Department of Taxation. Requests for information may also be addressed to: Virginia Department of Taxation, P.O. Box 1115, Richmond, VA 23218-1115, or call (804) 367-8037. DO NOT MAIL YOUR RETURNS TO THIS ADDRESS.

Obtaining forms on the Internet

You can obtain most Virginia income tax forms by connecting to **www.tax.virginia.gov.** The Department of Taxation menu offers information on software needed to read and print the form files. You must print the forms to use them. The forms are not designed to be completed on-screen. You can also pay your estimated taxes on-line through iFile.

INSTRUCTIONS FOR 2005 DECLARATION OF ESTIMATED INCOME TAX FOR CORPORATIONS

1. FILING REQUIREMENTS

Every corporation subject to state income taxation must make a declaration of estimated income tax for the taxable year if the corporation's state income tax for the same period, reduced by the allowable tax credits, can be expected to exceed \$1,000.

2. WHERE TO FILE AND PAY

The declaration must be filed with the **Virginia Department of Taxation**, **P.O. Box 1500**, **Richmond**, **VA 23218-1500**. The declaration must be accompanied by a check or money order, made payable to the Virginia Department of Taxation, for the amount of the installment due.

3. WHEN TO FILE AND PAY

Taxpayers filing on a fiscal year or calendar year basis should follow the declaration and payment schedule in the table shown below.

4. SHORT TAXABLE YEAR

A declaration of estimated income tax is not required for a period of less than twelve months, if:

- (a) the period is less than four months; or
- (b) the filing requirements are first met after the first day of the last month in the short taxable year.

Compute taxable income for the short taxable period on an annual basis by multiplying the income amount by twelve and dividing the result by the number of months in the short period. Refer to the table shown below to determine the date the declaration is to be filed and the number and the dollar amount of installments to be paid. You are not required to annualize your income if the short taxable year does not change your accounting period.

5. CONSOLIDATED OR COMBINED ESTIMATED TAX

An affiliated group filing a consolidated or combined return shall file a

declaration of estimated tax on the same basis as a corporation for each taxable year. A consolidated or combined return shall be considered the return of a single taxpayer for the purpose of Sections 58.1-500 through 58.1-504 of the *Code of Virginia*.

6. FAILURE TO PAY

Underpayment of estimated income tax payments will result in an addition to the tax from the due date of the installment until paid, or until the due date for filing the return, whichever is earlier. If the corporation has an underpayment of estimated tax and believes an addition to the tax should not be assessed, Form 500C, Corporation Underpayment of Estimated Tax, must be attached to the corporationis income tax return along with supporting schedules which support the applicable exception (included in Section 58.1-504 (D) of the *Code of Virginia*).

7. NO REMINDER NOTICES

Reminder notices for estimated tax installments will not be sent to you. Please use the attached vouchers to forward your payments when due.

8. EXTENSION REQUEST

To receive an automatic extension of six months or until 30 days after the extended due date for the federal return, whichever is later, enter your net tentative tax payment on Form 500E. The net tentative tax payment is the total estimated income tax for the taxable year reduced by estimated tax payments and allowable credits. Mail Form 500E and payment to the department by the due date of your corporate income tax return (Effective January 1, 2003, the 15th day of the sixth month after close of taxable year for a nonprofit corporation with unrelated business income). The form must be filed to receive an extension even when no payment is due. Electronic Funds Transfer (EFT) filers may either submit this form or may report a zero EFT corporate extension. If no payment is due when submitting this form, enter a zero in the net tentative tax payment block on the form.

DECLARATION AND PAYMENT SCHEDULE

The date the declaration is to be filed and the number and amount of installments to be paid is determined in accordance with the following table.

If the requirements are first metó	e first metó The declaration shall be filed The number on or before - of installments		The following percentages of the estimated tax shall be paid on or before the 15th day of the -			
		to be paid is-	4th month	6th month	9th month	12th month
before the 1st day of the 4th month of the taxable year	the 15th day of the 4th month of the taxable year	4	25%	25%	25%	25%
after the last day of the 3rd month and before the 1st day of the 6th month of the taxable year	the 15th day of the 6th month of the taxable year	3		33 1/3%	33 1/3%	33 1/3%
after the last day of the 5th month and before the 1st day of the 9th month of the taxable year	the 15th day of the 9th month of the taxable year	2			50%	50%
after the last day of the 8th month and before the 1st day of the 12th month of the taxable year	the 15th day of the 12th month of the taxable year	1				100%

HOW TO USE FORM 500ES

1. Complete the Estimated Tax Worksheet below to compute your estimated tax for 2005.

	Estimated Tax Worksheet		
	(This is your record - retain for your files)		
1.	Virginia net income expected in 2005	1.	\$
2.	Estimated tax for the entire year (6% of line 1, less allowable credits). If \$1,000 or less, no declaration is required.		
	Enter this amount on line 1 of the voucher	2.	\$
3.	For CALENDAR year taxpayers - if first filing is on or before:		
	April 15, 2005 enter 1/4 of line 2 here.		
	June 15, 2005 enter 1/3 of line 2 here.		
	Sept. 15, 2005 enter 1/2 of line 2 here.		
	Dec. 15, 2005 enter amount on line 2 here.		
	For FISCAL year taxpayers - see Declaration and Payment Schedule on preceding page and enter amount here	3.	\$
4.	Amount of any 2004 OVERPAYMENT to be credited to 2005 tax	4.	\$
5.	Amount of this estimated tax payment (line 3 less line 4)	5.	\$

- 2. Enter the estimated payment amount from line 5 (above), on line 2 of the first voucher.
- 3. The amount of SUBSEQUENT installment payments due (to be shown on line 2 of the appropriate voucher) will be the amount shown on line 3 (above).
- 4. If there is an overpayment from line 4 (above) which is larger than the first installment payment on line 3 (above), enter 0 on line 2 of the first voucher filed (NO PAYMENT IS DUE). If an overpayment is not deducted from the first installment payment then this amount can be applied toward the next installment payment due. The difference is entered on line 2 of the appropriate voucher.
- 5. You may elect to apply part of the OVERPAYMENT shown on line 4 (above) against an installment due. Divide the OVERPAYMENT by the number of installments due and deduct this amount from line 3 (above). The difference is entered on line 2 of the appropriate voucher.

HOW TO COMPLETE THE FORM 500ES VOUCHERS

- 1. Enter your Virginia account number, federal employer identification number, name, address, city, state and ZIP code on each voucher.
- 2. Enter the ending month and year in the appropriate box (calendar, fiscal or short taxable year) for which the estimated payment is made. EXAMPLE: If the ending month is March 2005, enter 03 05.
- 3. Enter on line 1 of the voucher the amount shown on line 2 of the worksheet.
- 4. Enter on line 2 of the voucher the amount of your payment.
- 5. Sign the first voucher you file and detach. You need not sign SUBSEQUENT vouchers UNLESS you are amending your estimate.
- Attach check or money order to the voucher and mail to the Virginia Department of Taxation, P.O. Box 1500, Richmond, VA 23218-1500.
 PRINT YOUR VIRGINIA ACCOUNT NUMBER ON YOUR CHECK OR MONEY ORDER. Fill in the Record of Tax Payments (below) for your own personal tax record.
- 7. For each SUBSEQUENT installment, enter your payment on line 2 of the voucher, attach your check or money order, and mail.

HOW TO AMEND FORM 500ES

If it is necessary to amend Form 500ES, follow these steps:

- 1. Fill out the Amended Computation schedule below.
- 2. Enter the revised amounts of estimated tax and payment on the NEXT voucher due.
- 3. Sign the voucher, detach, and mail with required payment on or before required due date.
- 4. For each subsequent installment, enter your payment on line 2 of the voucher, attach your check or money order, and mail.

Amended Computation							
(Use if estimated tax is changed after declaration has been filed.)							
	Amount						
1.	Amended estimated tax. (Enter here and on line 1 of the next voucher due.)	\$					
2.	Less any payments made or credits applied against 2005 declaration	\$					
3.	Unpaid balance (line 1 less line 2)	\$					
4.	Amount to be paid (line 3 divided by number of remaining installments). Enter here and on line 2 of the next voucher due	\$					

2005 ESTIMATED TAX PAYMENT RECORD

	DATE	CHECK OR MONEY ORDER NO.	AMOUNT	OVERPAYMENT CREDIT APPLIED	TOTAL AMOU PAID	JNT
PAYMENT MADE WITH DECLARATION			\$	\$	\$	
SECOND PAYMENT			\$	\$	\$	
THIRD PAYMENT			\$	\$	\$	
FOURTH PAYMENT			\$	\$	\$	
TOTALS			\$	\$	\$	

Return this voucher with a check or money order made payable to the Virginia Department of Taxation.

VIRGINIA ESTIMATED INCOME TAX DECLARATION FOR CORPORATIONS

VIRGINIA DEPARTMENT OF TAXATION

P.O. BOX 1500, RICHMOND, VA 23218-1500 FOR INFORMATION CALL (804) 367-8037

FORM 500ES (DOC ID 501) VOUCHER 4

To be used for making declaration and payment

						. ,
000001	350	030P 000000				1
To receive credit for your payment in	the correct tax yea	r, please enter the ending month	n (numerical) and year.	Month Ending	Year Ending	
Virginia Account Number	Federal Emplo	Federal Employer's ID Number				(FOURTH INSTALLMENT DUE 12/15/05) OF
Name of somewhite		First 4 latters of some name	Fiscal year:			OR;
Name of corporation		First 4 letters of corp. name	Short taxable year:			
Address (Number and street)		I.	1. Estimated tax			
			for the year \$			
Address continued						
City, State and Zip Code			2. Amount of			
 			this payment. \$			
I declare that this declaration has been	•	d to the best of my knowledge an	nd .			
belief, it is a true, correct, complete dec	laration.					
SIGNATURE						
Return this voucher with a chec		VIRGINIA ESTIMATEI				FORM 500ES
money order made payable to t Virginia Department of Taxa		DECLARATION FOR C				(DOC ID 501)
	P.O. BOX 1500,	VIRGINIA DEPARTMEN' RICHMOND, VA 23218-1500 ◆ I		LL (804) 367	′-8037	VOUCHER 3
	,	,		()		To be used for making declaration and payment
000001	350	030P 000000				
To receive credit for your payment in	the correct tax yea	r, please enter the ending month		Month Ending	Year Ending	
Virginia Account Number	Federal Emplo	oyer's ID Number	Calendar year:			(THIRD INSTALLMENT DUE 9/15/05) OR
Name of corporation		First 4 letters of corp. name	Fiscal year: Short taxable year:			OR;
name of corporation		Thist 4 letters of corp. Hame	Short taxable year.			
Address (Number and street)		•	1. Estimated tax			
			for the year \$			
Address continued						
City, State and Zip Code			2. Amount of			
			this payment. \$			
I declare that this declaration has been belief, it is a true, correct, complete dec		d to the best of my knowledge an	id .			
signature	iaration.					
Datum this was about	J	VIDOINIA ECTIMATEI	DINCOME TAY			FORM 500ES
Return this voucher with a chec money order made payable to t		VIRGINIA ESTIMATED DECLARATION FOR C				(DOC ID 501)
Virginia Department of Taxa	tion.	VIRGINIA DEPARTMEN				VOUCHER 2
	P.O. BOX 1500,	RICHMOND, VA 23218-1500 ♦ F		LL (804) 367	-8037	To be used for making
						declaration and payment
2222						
00000		0306 000000		Month Ending	Year Ending	I
To receive credit for your payment in		··	n (numerical) and year. Calendar year:	Wildrig Enality	Todi Eliding	(SECOND INSTALLMENT DUE 6/15/05)(
Virginia Account Number	Federal Em	ployer's ID Number	Fiscal year:			OR;
Name of corporation		First 4 letters of corp. name	Short taxable year:			J.,,
		3				
Address (Number and street)			1. Estimated tax			

2. Amount of

this payment. \$

belief, it is a true, correct, complete declaration.

SIGNATURE

I declare that this declaration has been examined by me and to the best of my knowledge and

Address continued

City, State and Zip Code

Return this voucher with a check or money order made payable to the Virginia Department of Taxation.

VIRGINIA ESTIMATED INCOME TAX DECLARATION FOR CORPORATIONS

VIRGINIA DEPARTMENT OF TAXATION

P.O. BOX 1500, RICHMOND, VA 23218-1500 FOR INFORMATION CALL (804) 367-8037

FORM 500ES (DOC ID 501) VOUCHER 1

To be used for making declaration and payment

nnnnnnn3500306 000000

00000	1000 1300		, ,				
To receive credit for your payment in	n the correct tax year,	please enter the en	ding month (nu	merical) and year.	Month Ending	Year Ending	
Virginia Account Number	Federal Employ	Federal Employer's ID Number		Calendar year:			(FIRST INSTALLMENT DUE 4/15/05) OR;
				Fiscal year:			OR;
Name of corporation		First 4 letters of o	corp. name	Short taxable year:			
Address (Number and street)		I	1	. Estimated tax for the year	5		
Address continued				ioi tile year			
City, State and Zip Code			2	. Amount of this payment.	5		
I declare that this declaration has be belief, it is a true, correct, complete of		d to the best of my	knowledge and				
SIGNATURE							
	VIRGINI	A CORPORATIO	ON INCOME TA	AX PAYMENT V	OUCHER		FORM
You must file this voucher with your Form 500, or Form 500-EC unless paying by EFT. VIRGINIA DEPARTMEN P.O. BOX 1500, RICHMOI FOR INFORMATION CA				VA 23218-1500			500V (DOC ID 500)
				,			Check type of return ☐ original ☐ amended
00000		500 00000			Month Ending	Voor Ending	
To receive credit for your payment in				_		Year Ending	
Virginia Account Number	Federal Emplo	yer's ID Number	Entity Type	Calendar year:			OR,
Name of corporation		First 4 letters	of corp. nome	Fiscal year:			OR;
Name of corporation		First 4 letters	of corp. name	Short taxable year:		Amount of	this payment
Address (Number and Street)						Amount of	•
Address continued				\$			
City, State and Zip Code				_	Attach this	voucher to Fo	orm 500, or Form 500-EC
Date		Telephone Number			with a checl		rder made payable to
VA DEPT OF TAXATION 2601205 (REV.	7/04)			_			
	<u> </u>						

Virginia Corporate Income Tax Extension Payment Voucher and Tentative Tax Return Virginia Department of Taxation P.O. Box 1500 Richmond, VA 23218-1500

For information call (804) 367-8037

An extension of six months, or until 30 days after the extended due date for the federal return, whichever is later, will be granted provided that this form and payment of tax due are received by the due date of the corporate return (nonprofit - see instructions). This form must be filed to receive an extension for filing even when no payment is due. Electronic Funds Transfer (EFT) filers may either submit this form or may report a zero EFT corporate extension. If no payment is due when submitting this form, enter a zero in the net tentative tax payment block below.

Check if a nonprofit corporation □

	J L I I I I I I	
nnnnnnnnnn	3500411	nnnnn

Virginia Account Number	Federal Employer's ID Number				
Name of corporation	First 4 letters of corp. name				
Address (Number and street)					
Address continued					
City, State and Zip Code					
I declare that this return (including any accompanying schedules) has been examined by					

___ Date: ____

/A	DEPT	OF	TAXATION	2601008	(REV	7/04)

	xable Year Ending	Check type of return ☐ 500 ☐ 500-EC
MON	TH YEAR	
\$	Net ter	ntative tax payment
	Make check or r	manay ardar navahla ta:

Make check or money order payable to: **Virginia Department of Taxation**